AFFIDAVIT OF FORGED WARRANT

The records of the		of Arkan	sas
reflect that	Agency	was issued Warrant nu	ımher
Payees(s) exactly	as original warrant		
		, in the amount of \$, the
Correct Fiscal Year and Number	Date		
same being in payment of			
In	voice # Agency # Fi	und Center Commitment Item Fund	
Social Security #	Gross Pay	Withholding	
Address – Payroll Only			
Daytime Telephone #		Disbursing Officer	
I/We,Payee (s)		, state that:	
Payee (s)			
3. I have not au 4. I have no kno person havii 5. If this warran	owledge of the where ng received cashed o	rson to sign my name to the warran eabouts of the warrant or of any oth or endorsed the warrant. yment, the endorsement is a forger	ier
Payee Signature		Payee Signature	
Address		Address	
City, State, Zip Code		City, State, Zip Code	
Daytime Telephone # ON THIS THE	 DAY OF	Daytime Telephone #, 20, before me persons described in and versions.	onally
appeared	to me known to	be the persons described in and v	vho
executed the foregoing instru delivered the same as their fo	ıment and acknowled ree act and deed for	b be the persons described in and volged that they signed, sealed, executhe purpose therein mentioned.	uted and
		NOTARY PURITC	
		NOTARY PUBLICCounty	State
		My commission expires	

INSTRUCTIONS – FILING OF AFFIDAVIT OF FORGED WARRANT FORM

- 1. Disbursement officer must complete form including agency, warrant number, date of issue, amount, invoice number, agency code, fund center (appropriation), commitment item (character code), fund, and disbursing officer's manual signature.
- 2. The <u>entire</u> form, including the notary portion, must be completed in order to process a lost or stolen warrant for all types of warrants.

Note: If there is more than one payee on an AASIS non-payroll warrant, <u>BOTH</u> must sign.